

Cass County

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Community Health Needs Assessment Snapshot

Promote Healthy Behaviors

Problems/Needs:

- County Health Rankings (2010) report Cass County's adult smoking rate at 21%. 30% of pregnant women report smoking, versus 15% statewide (Profile of Prenatal Health, 2009)
- 28% of Cass County residents are obese (County Health Rankings, 2010), and 60% are obese or overweight. Cass County resident survey (2010) indicates that over one-third of residents did not participate in any physical activity in the past month, and less than 8% of residents are consuming 5 or more servings of fruits and vegetables per day.
- Teen birth rate is 41.3 (2008 rate on the 2010 Cass County Health Snapshot) versus 33.4 statewide. (2005 rate: 37.2, 2002 rate: 37.5). 15% of Cass County pregnancies are occurring in women less than 20 years of age, versus 8% statewide (Profile of Prenatal Health, 2009).

Prevent Injuries

Problems/Needs:

- 58% of Cass County students report being bullied (Iowa Youth Survey, 2008) versus 56% statewide. While Cass County's percentage isn't that higher than the state's, we are concerned that more than half of our students report being bullied. Approximately half report that adults do nothing to intervene.
- Also concerning is the number of students reporting suicidal thoughts or behaviors. 15% of all students reported suicidal thoughts or behaviors and nearly 20% of 11th grade females reported one or more suicide attempts.
- Finally, Cass County child abuse rates have doubled in the last 10 years.
- Deaths and hospitalizations due to falls in residents over age 65 are high. Cass County death rate is 113.9 versus 69.5 statewide. Cass County hospitalization rate is 1487.1 versus 1175.2 statewide. (IDPH, 2002-2006, Falls in Iowa--Death and Hospitalization Rates)
- Youth violent & aggressive behavior, youth suicidal thoughts.

Protect Against Environmental Hazards

Problems/Needs:

None identified

Prevent Epidemics and the Spread of Disease

Problems/Needs:

- Family Planning nurses and healthcare providers report increasing numbers of STD's in the past year. While these increases are not yet showing up in publicly-reported data, our community feels this is an issue.

Prepare for, Respond to, and Recover from Public Health Emergencies

Problems/Needs:

- Current communication resources not sufficient to keep residents and public health partners aware of event situation and response. Incident management capacities hampered by staff's uncertainty of roles, methods used to engage roles during Emergency Operation Center meetings, methods used to inform staff of current incident operations, lack of involvement of Incident Command staff in improvement planning. Point of Dispensing operations need capacity to track internal and external inventory and schedule appointments efficiently. Additional closed Point of Dispensing operations needed.

Strengthen the Public Health Infrastructure

Problems/Needs:

- Lack of public's awareness of community health issues and resources

Community Health Improvement Plan

Goal	Strategies	Who is responsible?	When? (Timeline)
Less than 14% of Cass County residents will smoke.	Continue accessing local, regional, state, and federal resources for tobacco prevention and control, planning and implementing eligible and appropriate activities.	Karla/Denise	Annually
	Partner with CCMH community pillar initiative to implement systems-based tobacco control strategies.	Karla/Denise	Ongoing

Goal	Strategies	Who is responsible?	When? (Timeline)
Less than 25% of Cass County residents will be obese.	Increase consumption of local foods through collaborative efforts.	Cass County Food Policy Council, Cultivators, SWIFFI	Ongoing

Goal	Strategies	Who is responsible?	When? (Timeline)
Increase knowledge and awareness of community health issues and resources	Participate in newly-formed community "roundtable" discussions	Denise Coder or designee	Quarterly
	Establish public health website and Facebook page	Denise Coder, IHS Information Systems and Marketing	31-Jul-11
	Increase public health awareness through presence at community events such as county fair, health fair and special awareness campaigns such as National Public Health Week, Child Abuse Prevention Month, etc.	Denise Coder	Ongoing

Goal	Strategies	Who is responsible?	When? (Timeline)
Increase Emergency Preparedness and Response capacities.	Continue participation in Public Health Emergency Preparedness and Response programs, submit and complete work plans with eligible activities that meet identified needs.	Denise Coder, Heather Kauffman	Ongoing
	Engage multidisciplinary partners in planning, exercise, and response.	Denise Coder, Heather Kauffman	Ongoing

Goal	Strategies	Who is responsible?	When? (Timeline)
Reduce the teen birth rate to less than 30 per 1,000 females age 15 - 19. Include STD education in efforts.	Continue partnership with HCCMS Family Planning project, contribute to annual work plan development and implementation	Denise Coder, Linda Edelman	annually (work plan development) and ongoing
	Increase education and knowledge through efforts with community partners per HCCMS work plan.	Denise Coder, Linda Edelman	Quarterly